	CANDIDATE'S REPO	ORT
Hadeline Jasmine P.O. Box 189 Edgard, LA 70049	2 Office Sought (Include like of office as well as parish, city, town antifor election district.)  District Court Judge  Division A  St. John the Baptist	
3. Date of October 4, 2 This report covers from January 1 4. Type of Report:	2008 mount August 25,2008	1
90th day prior to primary 30th day prior to primary 10th day prior to primary	40th day after peneralAnnual (future election)Supplemental (past election)	Missing numbered pages .vere
5. FINAL REPORT IF.  Withdrawn Filed a	Amendment to prior report.	blank and had no information
6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market multist fund as the depository of all campaign funds.)  Capital One Bank 24441 Highway 18	7. Full Name and Address of Treasurer  Chermaine Roybiskie  134 E. 14th St.  Edgard, LA 70045	· · · · · · · · · · · · · · · · · · ·
9. Name of Person Preparing Report Made Daystime Telephone (504) 450 - 6	line Jasmine	<u> </u>
schedules is true and correct to the best of our kn expenditures have been made nor contributions required to be reported by the Loubeen deliberately omitted.  This 27 day of Hugust	dived that trave not been reported herein, and	<ul> <li>B. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY</li> <li>Name and address of principal campaign committee, committee's chaliperson, and subsidiary committees, if any (use additional cheets if necessary).</li> </ul>
Signature of Candidate/Chairpelson (To be signad by Chairperson only if report by principal campaign committee)		
Signature of Treasurer Form 102 Rev. 1860, Page Rev. 3800	<u>€</u> <u>(985) 497-8539</u>	

## SUMMARY PAGE

RECEIPTS	This Period
Contributions (Schedule A-1)	
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphemalia sales of \$25 or less	
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +3)	······································
5. Other Receipts (Schedule A-3)	\$ 5.97
6. Loans Received (Schedule B)	
7. Loan Repayments Received (Schedule D)	
8. TOTAL RECEIPTS (Lines 4+5+5+7)	5 47

DISBURSEMENTS	This Period
Expenditures (Schedule E-1)	\$600.00
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	<del></del>
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	5 / 00 00

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period (Must equal funds on hand at close from fast report or -0- if first report for this election)	10,216.56
15. Plus total receipts this period (Line 8 above)	5.97
16. Less total disbursements this period (Line 13 above)	600.00
17. Less in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	59,622,53

Page 2 of 5 pages.

## SCHEDULE A-3: OTHER RECEIPTS

This schedule is used to report those receipts that are not "contributione"; that is, montes paid to the campaign that are not given for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include interest or investment income. Receipts should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the receipt should state the reason the payment was made to the campaign.

In this report. The explanation of the receipt sho	uld state the reason the p	payment was made to the campai	gn.
1. Nume and Address of Source	2. Date(s)	3. Explanation(s)	4. Amount(s)
Capital One Bank 2447 Highway 18 Edgard, FA 70049	01-01-08 through 08-25-08-	Interest Income	
<u> </u>		<u>-</u>	
			<del></del>
. Total OTHER RECEIPTS during this reporting period	<u></u>		\$ 5.97

## SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "expenditure" is any payment made for the purpose of supporting your election to public office and includes monles spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are optional. Completion of totals and subtotals may assist in calculating totals that must be

Name and Address of Recipient	Expenditures this R     a. Dete(s)	b. Purpose(s)	c. Amount(s)	
Madeline Jasmine P.O. Box 189 Edgard, LA 70049	July 9, 2008	Reimbursement of qualifying fee- campaign account check not acceptable	\$ 600.00	
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		i		
			<u>.                                      </u>	
GUBTOTAL (optional)				
OTAL (optional - complete only on last page of this			\$ 600.00	